## **Appointments Above the Minimum Rate Approval Form**

The requesting official, normally the immediate supervisor, completes items 1-6 and attaches a written justification for the advanced rate that addresses the candidate's existing pay and the superior qualifications or special Agency needs for the candidate's services. (See ADS 467, Internal Mandatory Reference Implementation Guidelines for Authorizing Appointments Above the Minimum Rate, Criteria for Approving an Appointment Above the Minimum Rate.)

1.	Candidate's Name:
2.	Position Title/Organization:
3.	Recommended Grade/Step and Salary:
4.	Effective Date of Appointment:
	<b>Qualifications</b> (Check Item a or b below): The advanced rate of pay requested for this ndidate is based on the candidate's existing pay and:
	a Unusually high qualifications for the particular position that are superior to that expected of a well-qualified candidate; or
	b A unique combination of education and experience that meets a special need of the Agency.
6.	Recommended by:
	Name of Recommending Official
	Title Date
7.	Approved by:
	Name of Approving Official (Chief or Team Leader, M/HR/POD, or Chief, Office of Management, IG/M)
	Date
Αt	tachments:
	(1) Written Justification
	(2) Supporting Documents
Dis	tribution AID Form 400-17:

Original – Official Personnel Folder One Copy – M/HR/POD or IG/M Files